

## **Frequently Asked Questions about Hospice Provider Notice 01-06**

### ***Medicaid Approval for Hospice Care***

1. **Question:** Should providers send information to the agency after the initial certification for hospice, i.e. for subsequent 90 day or 60 day periods?

**Answer:** No, a provider should send information to the Medicaid Agency for an initial hospice election and if a patient will be on the program for six months or longer.

2. **Question:** If a provider has recipients that have been on the program longer than six months before February 1, 2006, should information for that patient be sent to the Medicaid Agency?

**Answer:** The provider should send information to the Medicaid Agency if the recipient remains on the hospice program 6 months after the effective date of the policy change of February 1.

3. **Question:** This policy change has the potential for placing a burden on Medicaid Agency staff. Is there a possibility that providers will be able to process applications and approve the level of care?

**Answer:** This a difficult question to answer at this time. The retrospective review process was very time intensive and the agency found many individuals were placed on the hospice program inappropriately. The inappropriate placements have placed a great administrative burden on the agency due to the time involved in determining and initiating recoupments and the fair hearing process.

4. **Question:** Should providers send information to Medicaid for dually eligible recipients in the nursing home?

**Answer:** Providers should not send information to Medicaid for initial hospice elections and recipients on the program 6 months or longer who are dually eligible.

5. **Question:** Should providers continue to use the Medicaid Hospice election form for dually eligible recipients?

**Answer:** No, hospice providers can now use the Hospice Recipient Status Change Form to notify the agency of dates to be added to the LTC for dually eligible recipients upon initial admission, who are discharged from the nursing home to the hospital or from the nursing home to the community, expire or are readmitted to the nursing home from the hospital.